



RCE

F-9183

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant : Kotaro ONO  
Serial No. : 10/588,355  
Filed : August 3, 2006  
For : LIGHT ALLOY WHEEL  
Group Art Unit : 3617  
Examiner : Kip T. Kotter

Certificate of Mailing Under 37 CFR 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to COMMISSIONER FOR PATENTS, P.O. Box 1450, Alexandria, VA 22313-1450 on September 9, 2009.

C. Bruce Hamburg  
(Name)

[Signature]  
(Signature)

**MAIL STOP RCE**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**REQUEST FOR CONTINUED EXAMINATION  
UNDER 37 CFR 1.114**

Sir:

A Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified patent application is hereby made by the applicant. Applicant provides the submission indicated below.

**SUBMISSION UNDER 37 CFR 1.114**

Please enter the Amendment after Final Rejection under 37 CFR 1.116 previously filed on August 14, 2009.

09/14/2009 CCHAU1 00000030 10588355

01 FC:1801  
02 FC:1252

810.00 OP  
360.00 OP

**RCE FEE AUTHORIZATION**

Please charge the fee of \$810 for the Request for Continued Examination in accordance with the PTO Form 2038, Credit Card Payment form, provided herewith.

**REQUEST FOR EXTENSION OF TIME**

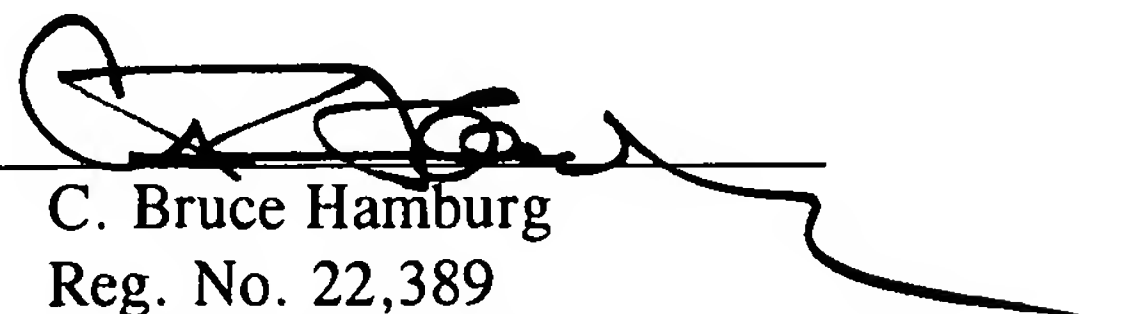
Applicant respectfully requests a second month extension of time for responding to the Office Action. The fee of \$360 for the extension is provided for in the charge authorization presented in the PTO Form 2038, Credit Card Payment form, provided herewith.

If there is any discrepancy between the fee(s) due and the fee payment authorized in the Credit Card Payment Form PTO-2038 or the Form PTO-2038 is missing or fee payment via the Form PTO-2038 cannot be processed, the USPTO is hereby authorized to charge any fee(s) or fee(s) deficiency or credit any excess payment to Deposit Account No. 10-1250.

Respectfully submitted,

Jordan and Hamburg LLP

By

  
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Enc.: PTO 2038 form (Credit Card Payment Form)